

**BAKER BOTTS LLP****RECEIVED**

AUG 14 2002

TECH CENTER 1600 2900

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 33990-068660.0115															
In re Application of <u>Edwards</u>																	
Application Number <u>09,680,738</u>		Filed <u>10 06 00</u>															
For <u>ADJUSTABLE SENSITIVITY ...</u>																	
Group Art Unit <u>1636</u>		Examiner <u>B. Loeb</u>															
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$ <u>400</u></td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>200</u></p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-4377</u></p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table><tr><td><u>8/9/02</u> Date</td><td><u><i>Michelle LeCointe</i></u> Signature</td></tr><tr><td>PTO Reg No.: <u>48,861</u></td><td><u>Michelle LeCointe</u> Typed or printed name</td></tr></table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted</p>				<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>400</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	<u>8/9/02</u> Date	<u><i>Michelle LeCointe</i></u> Signature	PTO Reg No.: <u>48,861</u>	<u>Michelle LeCointe</u> Typed or printed name
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____																
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>400</u>																
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____																
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____																
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____																
<u>8/9/02</u> Date	<u><i>Michelle LeCointe</i></u> Signature																
PTO Reg No.: <u>48,861</u>	<u>Michelle LeCointe</u> Typed or printed name																



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Please type a plus sign (+) inside this box → ☐

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 09/680,738

Filing Date 10/06/00

First Named Inventor Edwards

Group Art Unit 1636

Examiner Name B. Loeb

Total Number of Pages in This Submission

Attorney Docket Number 33990-068660.0115

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ENCLOSURES (check all that apply)

- ☒ Fee Transmittal Form
- ☒ Fee Attached
- ☒ Amendment / Reply
- ☒ After Final
- ☐ Affidavits/declaration(s)
- ☒ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/Incomplete Application
- ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☒ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☐ Other Enclosure(s) (please identify below):

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

BakerBotts LLP

Signature

Att Name: Michelle LeCointe
PTO Reg: 48,861

Date

8/9/02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express mail (EV141765227) in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 8/9/02

Typed or printed name

Shannon Judice

Signature

Date 8/9/02



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**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

(\$ 200)

Complete if Known

Application Number	09 680.738
Filing Date	10/06/00
First Named Inventor	Edwards
Examiner Name	B. Loeb
Group Art Unit	1636
Attorney Docket No	33990-068660 0115

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit
Account
Number

22-4377

Deposit
Account
Name

Baker Botts LLP

- ☒ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

- ☒ Applicant claims small entity status.
See 37 CFR 1.27

2. ☒ Payment Enclosed:

- ☒ Check ☐ Credit card ☐ Money
Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
740	370	Utility filing fee	
330	165	Design filing fee	
510	255	Plant filing fee	
740	370	Reissue filing fee	
160	80	Provisional filing fee	

SUBTOTAL (1) (\$ 0)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
13	20** = 0		0
1	3** = 0		0
Multiple Dependent			

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
84	42	Independent claims in excess of 3
280	140	Multiple dependent claim, if not paid
84	42	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ 0)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
110	55	Extension for reply within first month	200
400	200	Extension for reply within second month	
920	460	Extension for reply within third month	
1,440	720	Extension for reply within fourth month	
1,960	980	Extension for reply within fifth month	
320	160	Notice of Appeal	
320	160	Filing a brief in support of an appeal	
230	115	Request for oral hearing	
1,510	1,510	Petition to institute a public use proceeding	
110	55	Petition to revive - unavoidable	
1,280	640	Petition to revive - unintentional	
1,280	640	Utility issue fee (or reissue)	
460	230	Design issue fee	
620	310	Plant issue fee	
130	130	Petitions to the Commissioner	
50	50	Processing fee Under 37 CFR 1.17(q)	
180	180	Submission of Information Disclosure Stmt	
40	40	Recording each patent assignment per property (times number of properties)	
740	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
740	370	For each additional invention to be examined (37 CFR § 1.129(b))	
740	370	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 200)

SUBMITTED BY

Name (Print Type) Michelle LeCointe

Registration No.
(Attorney/Agent)

48,861

Complete (if applicable)

Telephone 512.322.2580

Signature

Date 8/9/02

WARNING: Information on this form may become public. Credit card information should not
be included on this form. Provide credit card information and authorization on PTO-2038.